Application Data Sheet

Application Information

Application Type:: Regular Subject Matter:: Utility

Suggested Classification::
Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of Copies of CDs::

Sequence Submission?:: None
Computer Readable Form (CRF):: No

Number of copies of CRF:: 0

Title:: MECHANISM FOR DISPLAYING THE

MOON PHASES

Attorney Docket Number:: 5001-1122

Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure:: 5B
Total Drawing Sheets:: 6

Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Gov't Agency::
Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: GERMANY

Status:: Full Capacity

Given Name:: GERD

Middle Name::

Family Name:: PLANGE

City of Residence:: SCHAFFHAUSEN

State or Province of

Residence::

Country of Residence:: SWITZERLAND

Street of Mailing STETTEMERSTRASSE 4

Address::

City of Mailing Address:: SCHAFFHAUSEN

State or Province of Mailing Address::

Country of Mailing Address:: SWITZERLAND Postal or Zip Code of Mailing Address:: 8207

Applicant Authority Type:: Inventor

Primary Citizenship Country:: SWITZERLAND
Status:: Full Capacity

Given Name:: DENIS

Middle Name::

Family Name:: ZIMMERMANN

City of Residence:: KLEINANDELFINGEN

State or Province of

Residence::

Country of Residence:: SWITZERLAND

Street of Mailing SIGELWIESSTRASSE 8

Address::

City of Mailing Address:: KLEINANDELFINGEN

State or Province of Mailing Address::

Country of Mailing Address:: SWITZERLAND

Correspondence I	nformation		
Correspondence Customer		000466	
Number::			
Representative Information			
Representative Customer		000466	
Number::			
Domestic Priority Information			
Application::	Continuity	Parent	Parent Filing
	Type::	Application::	Date::
Foreign Priority Information			
Country::	Application	Filing Date::	Priority
	Number::		Claimed::
EUROPE	03002811.2	2/7/03	Yes
Assignment Infor	mation		
Assignee Name::		RICHEMONT INTERNATIONAL SA	
Street of Mailing Address:: 10,		ROUTE DES BICHES	
City of Mailing Address::		VILLARS-SUR-GLANE	
State or Provinc	e of Mailing Addr	ess::	
Country of Mailing Address::		SWITZERLAND	

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Postal or Zip Code of Mailing Address:: 8451

Postal or Zip Code of Mailing Address:: 1752